

## CJA 20 APPOINTMENT OF AND AUTHORITY TO PAY COURT APPOINTED COUNSEL

1. CIR./DIST./DIV. CODE <b>MAX</b>		2. PERSON REPRESENTED <b>Vega, Tony</b>		VOUCHER NUMBER	
3. MAG. DKT./DEF. NUMBER <b>1:04-000487-001</b>		4. DIST. DKT./DEF. NUMBER		5. APPEALS DKT./DEF. NUMBER	
6. OTHER DKT. NUMBER		7. IN CASE/MATTER OF (Case Name) <b>U.S. v. Vega</b>		8. PAYMENT CATEGORY <b>Felony</b>	
9. TYPE PERSON REPRESENTED <b>Adult Defendant</b>		10. REPRESENTATION TYPE (See Instructions) <b>Criminal Case</b>			
11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) If more than one offense, list (up to five) major offenses charged, according to severity of offense. <b>1) 18 1543. F -- FORGERY OR FALSE USE OF PASSPORT</b>					
12. ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix) AND MAILING ADDRESS <b>WITKIN, ROGER 6 BEACON STREET SUITE 1010 BOSTON MA 02108</b>			13. COURT ORDER <input checked="" type="checkbox"/> O Appointing Counsel <input type="checkbox"/> C Co-Counsel <input type="checkbox"/> F Subs For Federal Defender <input type="checkbox"/> R Subs For Retained Attorney <input type="checkbox"/> P Subs For Panel Attorney <input type="checkbox"/> Y Standby Counsel Prior Attorney's Name: _____ Appointment Date: _____ <input type="checkbox"/> Because the above-named person represented has testified under oath or has otherwise satisfied this court that he or she (1) is financially unable to employ counsel and (2) does not wish to waive counsel, and because the interests of justice so require, the attorney whose name appears in Item 12 is appointed to represent this person in this case, or <input type="checkbox"/> Other (See Instructions) _____ Signature of Presiding Judicial Officer or By Order of the Court <u>Thomas L. Quinn</u> Date of Order: <b>03/01/2005</b> Nunc Pro Tunc Date _____ Repayment or partial payment ordered from the person represented for this service at time of appointment: <input type="checkbox"/> YES <input type="checkbox"/> NO		
14. NAME AND MAILING ADDRESS OF LAW FIRM (only provide per instructions)					
CLAIM FOR SERVICES AND EXPENSES					
CATEGORIES (Attach itemization of services with dates)		HOURS CLAIMED	TOTAL AMOUNT CLAIMED	MATH/TECH ADJUSTED HOURS	MATH/TECH ADJUSTED AMOUNT
In Court	15. a. Arraignment and/or Plea				
	b. Bail and Detention Hearings				
	c. Motion Hearings				
	d. Trial				
	e. Sentencing Hearings				
	f. Revocation Hearings				
	g. Appeals Court				
	h. Other (Specify on additional sheets)				
(Rate per hour = \$ ) TOTALS:					
Out of Court	16. a. Interviews and Conferences				
	b. Obtaining and reviewing records				
	c. Legal research and brief writing				
	d. Travel time				
	e. Investigative and Other work (Specify on additional sheets)				
(Rate per hour = \$ ) TOTALS:					
17. Travel Expenses (lodging, parking, meals, mileage, etc.)					
18. Other Expenses (courtroom expenses, transcripts, etc.)					
GRAND TOTALS (CLAIMED + ADJUSTED)					
19. CERTIFICATION OF ADOPTION OF PAYMENT BY COURT APPOINTED COUNSEL SERVICE FROM _____			TERMINATION DATE ON CASE COMPLETION		21. CASE DISPOSITION
22. CLAIM STATUS <input type="checkbox"/> Final Payment <input type="checkbox"/> Interim, subject to other Have you previously applied to the court for compensation and/or reimbursement for this case? <input type="checkbox"/> YES <input type="checkbox"/> NO Other than from the court, have you, or to your knowledge has anyone, received payment (compensation or reimbursement) for this case? <input type="checkbox"/> YES <input type="checkbox"/> NO      If yes, give details on additional sheets. I swear or affirm the truth of the above statements. Signature of Attorney: _____			Payment If yes, were you paid? <input type="checkbox"/> YES <input type="checkbox"/> NO from any other source in connection with this		
23. IN COURT COMP. _____			27. TOTAL AMT. APPR/CERT		
28. SIGNATURE OF THE COURT APPOINTED COUNSEL _____			28a. JUDGE/MAG. JUDGE CODE		
29. IN COURT COMP. _____			33. TOTAL AMT. APPROVED		
34. SIGNATURE OF CHIEF JUDICIAL OFFICER (OR CLERK OR DEPUTY CLERK) Payment approved in excess of the statutory limit _____			34a. JUDGE CODE		